

1 UNITED STATES DISTRICT COURT
2 DISTRICT OF OREGON
3 THE HON. ANN AIKEN, JUDGE PRESIDING
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6 UNITED STATES OF AMERICA,)
7 Government,)
8 v.) No. 6:11-cr-60097-AA-1
9 CODY SETH CRAWFORD,)
10 Defendant.)
11 _____)
12

13 REPORTER'S TRANSCRIPT OF PROCEEDINGS
14 EUGENE, OREGON
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PROCEEDINGS

WEDNESDAY, APRIL 11, 2018

THE CLERK: Now is the time set for Criminal Case No. 11-60097, the United States of America versus Cody Seth Crawford for revocation hearing.

THE COURT: Mr. Lessley.

MR. LESSLEY: Good morning, Your Honor.

There are two petitions, one of them dated September the 26th of 2017, alleging that Mr. Crawford failed to complete and participate in the program of an RRC and then the second petition dated October the 10th of 2017, alleging a new law violation, essentially spitting at a member of the sheriff's office at the jail.

Mr. Crawford is prepared to admit both violations.

With respect to the first violation; that is, the termination from the RRC, there's a lot in the narrative that he either doesn't remember or just doesn't agree with, and so I don't want to be in a position of nitpicking the narrative.

He does admit that he, through his own conduct, caused himself to be discharged from the RRC.

THE COURT: Mr. Crawford, you heard what Mr. Lessley has told me about your desire to go forward today and admit the allegations in both petitions, correct?

THE DEFENDANT: Yes, Your Honor.

09:18:23 1 THE COURT: And he has been your lawyer for some
2 time?

3 THE DEFENDANT: Yes.

4 THE COURT: And you understand you have a right to
5 challenge these allegations, put on witnesses, testify, and
6 require the government to prove these are true?

7 THE DEFENDANT: Yes, I do.

8 THE COURT: And you wish to waive those rights and
9 simply admit that these are in fact true?

10 THE DEFENDANT: Yes, Your Honor.

11 THE COURT: And you understand you could be
12 resentenced up to -- between three to nine months but
13 potentially up to two years?

14 THE DEFENDANT: Yes, Your Honor.

15 THE COURT: So you wish to waive your rights and
16 simply tell me that these are true, correct?

17 THE DEFENDANT: Yes.

18 THE COURT: So in the October 10th, 2017, petition
19 for the show cause order, is it true that you violated
20 Standard Condition No. 2, you shall not commit another
21 federal, state, or local crime and shall not illegally
22 possess a controlled substance and that you were arrested
23 for two counts of aggravated harassment while in the Lane
24 County Jail, you were arraigned on aggravated harassment,
25 and the court trial date was set November 8th, 2017, in the

09:19:32 1 Lane County Circuit Court case. That was the case, and I
2 presume that's been resolved.

3 MR. LESSLEY: Your Honor, it's actually scheduled
4 to be resolved tomorrow.

5 THE COURT: All right.

6 MR. LESSLEY: Although there's an issue that Lane
7 County hasn't writed him yet. But he has a currently
8 scheduled court date for tomorrow. This is a joint
9 resolution. The state knows --

10 THE COURT: All right. Excellent. So that's part
11 of this -- so you acknowledge that -- tomorrow you are going
12 to apparently acknowledge that that did in fact happen?

13 THE DEFENDANT: Yes, Your Honor.

14 THE COURT: With regard to the earlier allegation,
15 violation of Special Condition No. 3, you must reside and
16 participate in the program at the residential reentry center
17 for not more than 180 days and follow all the rules and
18 regulations, a number of your acts and behaviors caused you
19 to be kicked out of the RRC and a verbal warrant issued by
20 the court on September 25th, 2017; is that right?

21 THE DEFENDANT: Yes, Your Honor.

22 THE COURT: Are you satisfied, counsel?

23 MR. BRUCE: Yes, Your Honor.

24 THE COURT: So you wish to admit both allegations,
25 correct?

09:20:34 1 THE DEFENDANT: Yes.

2 THE COURT: Admissions are noted.

3 Disposition.

4 MR. LESSLEY: Your Honor, if I may --

5 Go ahead and sit down.

6 I know Mr. Crawford as well as I have ever known a
7 client, and Your Honor knows him quite well too. And it's
8 an unfortunate part of his psychology that every few years
9 with a lot of irregularity he goes into these manic states.
10 He did so during -- a couple of times during the time that
11 his original case was pending. It's also part of his
12 history.

13 There's very little doubt in my mind that he was
14 in one of those states last September. The descriptions of
15 his behavior are very similar to the descriptions of his
16 past behavior. He's had multiple hospitalizations in the
17 Oregon State Hospital.

18 When he was charged with the spitting incident in
19 Lane County and acquired a lawyer, I communicated with that
20 lawyer. Her name is Allison Knight. And I provided to
21 Ms. Knight the previous psychological diagnoses that had
22 been prepared during Mr. Crawford's original case, both done
23 by our side and also done by the Oregon State Hospital.

24 Ms. Knight has also had him undergo a
25 psychological evaluation in the last few months. She has

09:21:58 1 not shared the results of that with me. She hasn't shared
2 them with Mr. Crawford. But my understanding is that the
3 results of that examination have led the district attorney's
4 office to agree to the disposition that's suggested here in
5 the probation office's recommendation.

6 The anticipation is that he will get a reimposed
7 term of federal supervision; that he will get an RRC
8 placement. The recommendation is up to 120 days.

9 Our request and a very strong request is that that
10 be at the Northwest Regional Reentry Center. I will talk
11 about that in a minute.

12 He also is going to undergo mental health
13 treatment. Our request is that be at the Dual Diagnosis
14 Program at LifeWorks.

15 And I have shared those recommendations with the
16 Lane County attorney, and I understand they will be
17 incorporated into the terms of the Circuit Court judgment,
18 hopefully tomorrow, and so that he will plead guilty in
19 Circuit Court, he will receive this disposition, and will be
20 on probation in both courts.

21 The reason we want Portland is partly because of
22 the resource of LifeWorks; partly also because his mother is
23 still in a very bad state struggling with cancer. She is at
24 OHSU. She has been struggling with it for a long time, and
25 it seems like it's late stage at this point. So we'd like

09:23:27 1 to be able to work through the reentry center there to be
2 able to have him visit.

3 Also, it's just closer to his home. He grew up in
4 McMinnville, and he's just closer to that area.

5 So our request is that the court follow the
6 recommendations in the probation recommendation. That's
7 just the background.

8 But there's very little doubt in my mind he was
9 going through yet another manic phase. Sometimes they last
10 a long time; sometimes they don't. He's not in it now, but
11 it's just an unfortunate part of his life.

12 MR. BRUCE: Thank you, Your Honor.

13 Unlike Mr. Lessley, I am newer to this case. Bud
14 Fitzgerald of our office prosecuted this case initially as
15 well as the supervised released issue up until his
16 retirement at the end of last year.

17 So I took it upon myself to kind of get an idea of
18 where we are at this point. And these are some of the
19 things that I see, which is that he was -- Mr. Crawford was
20 released from the Oregon -- from OHP in October of 2016 and
21 one month later was arrested on a felony elude and a DUI.
22 He received a time served sentence for that in February of
23 2017 but then failed to attend drug and alcohol -- a drug
24 and alcohol assessment following that conviction.

25 In July of 2017, he was arrested on a probation

09:25:08 1 violation after testing positive for methamphetamine and
2 marijuana and spent -- and was given a 60-day sentence.

3 And then as -- in concert with the federal
4 probation office and the state, he was then released to the
5 RRC in September of 2017. Not more than two weeks after
6 arriving at the RRC, he started creating disturbances at the
7 RRC. Would fail to -- or refused to sign a mental health
8 assessment and, as alleged and admitted, was unwilling to
9 abide by the rules and regulations of the RRC as well as the
10 mental health treatment aspect of the center.

11 Looking at this pattern and the pattern of
12 Mr. Crawford's history, needless to say, the United States
13 is very concerned that when Mr. Crawford -- that
14 Mr. Crawford will remain a danger to society and to himself
15 if he does not follow through with appropriate mental health
16 treatment.

17 And the history of violence and dangerous
18 instability is evident in this record. It's not only in the
19 count of conviction here, it's a hate crime against the
20 Islamic Center in Corvallis, but as well as the conviction
21 that led him to the Oregon -- OHP in 2013. It's -- simply
22 put, when Mr. Crawford is unstable, the public is at risk.

23 So the original recommendation of probation, which
24 was a six-month sentence, it's clear that he's already spent
25 about that amount of time prior to this hearing as well as

09:27:10 1 on the state -- state crime issue.

2 And so therefore, we do -- we do agree with the
3 recommendation of probation for time served and a
4 reimposition of supervised release for the 36 months with
5 the mandatory mental health treatment.

6 I usually wouldn't speak at greater length when I
7 am simply agreeing with a recommendation, but I do think
8 it's -- it is worth noting what our concern is is that when
9 that treatment is not present in his life that it's
10 dangerous to society and it's dangerous to himself.

11 And so we would hope that whatever the resolution
12 here and whatever options he has available to him in
13 Portland, whether it's here or in Portland, that -- that we
14 are able to have a close eye on him because I am concerned
15 and the United States is concerned.

16 THE COURT: I am appreciative of the United
17 States' concern, but the huge, glaring gap in what you just
18 said is this:

19 This is an article that came out June 14th, 2017.

20 Oregon ranks worst, W-O-R-S-T, in the United
21 States for mental health. 51st. A new facility
22 opened in Portland to help people in crisis.
23 Oregon has the worst mental health rate in the
24 country, according to a recent study. It's called
25 the Unity Center 24/7 mental health facility for

09:28:46 1 those in need of immediate help. It's a
2 collaboration by OHSU, Legacy, Adventist and
3 Kaiser near the Moda Center in Northeast Portland.

4 Directors of the Unity Center say they have
5 been about a 95 -- it's been 95 percent full since
6 they opened in January. It has inpatient rooms
7 where people can stay for several weeks, join
8 therapy groups, and receive medication. They say
9 the problem is so bad, about 40 percent of the
10 people who arrive have to be committed to
11 long-term, involuntary facilities such as the
12 State Hospital in Salem.

13 The nonprofit Mental Health American --
14 Mental Health America recently ranked Oregon the
15 worst in the country for mental health rates and
16 little success to help for it. The study says
17 that we have some of the worst rates for
18 homelessness, high school graduations, and child
19 abuse. It all ranks and is all contributed to
20 mental health.

21 I think it's an epidemic as a nation, but I
22 don't think we do well taking care of people with
23 mental health illnesses, said a Portland
24 psychiatrist Mary Theodore. She says part of the
25 problem is Oregon has so few psychiatrists,

09:29:48 1 partially because of low salaries, and, of the
2 psychiatrists who are in the state, most of them
3 are full and don't take new patients.

4 There's a certain percentage of people with
5 psychotic disorders who are paranoid and are not
6 being treated with medication and, in their
7 paranoid state, have a lot of suspicion about
8 going to see a doctor.

9 She believes Oregon also needs more master's
10 level social workers in our hospitals to spot
11 mental illness and to get people the kind help
12 they need, more day programs to get people therapy
13 so they don't reach the crisis point that would
14 admit them to facilities like Unity Center.

15 National statistics show about one in four
16 people has a mental health issue. Dr. Theodore
17 believes it's even higher. 35 to 40 percent of
18 the people will see some kind of mental health
19 show up in their lifetime.

20 It may sound expensive, but in the end it's a
21 lot less expensive than having people in a
22 revolving door going in and out of emergency rooms
23 and using police officers to pick them up in the
24 streets. I would also say parenthetically
25 correctional facilities.

09:30:46

1 The Unity Center's vice president,
2 Mr. Ferentinos, says that they are seeing up to
3 eight ambulances every day delivering people in an
4 immediate mental health crisis.

5 They are in high distress. They are
6 depressed, suicidal. We see individuals who are
7 psychotic. They are out of control, presenting
8 with paranoia or high on a drug like meth.

9 It's changing how police respond to calls for
10 troubled persons in the street. Instead of
11 dropping them off at a hospital where they would
12 be admitted for one night, given a pill, and then
13 sent back on the streets the next day, the Unity
14 Center is helping to fight the root cause.

15 Instead of taking this person to jail because
16 they are mentally in distress, they are actually
17 bringing them here, which is a good thing.

18 Ferentinos says 77 percent of patients can be
19 stabilized in the first 24 hours with medication
20 and therapy and will be discharged with a plan and
21 follow-up contacts. But she says homelessness and
22 mental illness are intertwined.

23 I think individuals who are homeless and have
24 mental illness most of time are having difficulty
25 staying in stable housing because of their

09:31:46

1 behavior, and sometimes they are just a little
2 different or out of control. The stress and
3 instability we are living in in Oregon and around
4 the country, it has definitely had a contribution
5 to what we are seeing in the mental health system.

6 Years ago there was a national movement to
7 close institutionalized mental health hospitals
8 because of harsh treatment and poor funding.
9 Hospitals in Portland and Eastern Oregon closed
10 down. That left many of the patients homeless
11 because of inadequate follow-up care and housing.

12 An outpatient center to coordinate with Unity
13 is opening later this month by Adventist in
14 Northeast Portland. Experts say we need even
15 more.

16 I say that because you didn't even mention mental
17 health evaluations.

18 This gentleman is one of the cases that requires
19 the system to have, frankly, better mental health services
20 because he is going to have episodic difficulties. That's
21 just the nature of his disease.

22 Just like if you read the paper today, Mariah
23 Carey, your well known singer with a lot of money, she has
24 been able to hire and get the help she needs when she goes
25 into her episodic, classic crash and burns.

09:32:51 1 This gentleman goes out into the community, but we
2 have inadequate services. I am concerned, and I am going to
3 put him up in the Northwest Regional Reentry Center, and I
4 am going to ask that Matt Preuitt take this case over.

5 But Matt Preuitt can't take every single mental
6 health case in this state. And he's the probation officer
7 that has the best relationships with all the bare minimum of
8 services that are offered in Portland.

9 So the government can be upset and want to do
10 something, but I am going to tell you, Patty Perlow, the DA
11 over there, and I talk about this mental health crisis every
12 single time we are together. This community doesn't have
13 remotely what it needs to help the mental health community
14 and the individuals like this, and they are going to fail
15 and they are going to commit crimes.

16 There by the grace of God could any member in your
17 family end up in this situation, and we need to do better.

18 So I call on the United States government to
19 actually recognize that we don't have the services, we don't
20 have the resources, we don't have the housing, we don't have
21 the institutional places to deal with the way in which we
22 need to humanely take care of people who have mental health
23 issues.

24 Now, Mr. Crawford has -- when he is medicated, not
25 in one of his cycles, he does pretty darn well. And then he

09:34:09 1 gets -- either because the brain chemistry is so fragile it
2 tips or his medications aren't right or lots of times people
3 go into that manic phase and they think they are capable of
4 all sorts of things, and they go off their medications.

5 That's -- that's a systems issue we have to deal
6 with, and one at a time my goal is to get people to start
7 recognizing that so many people that we are sentencing have
8 those incredible, very complex, difficult bases of their
9 criminal justice activity and that we don't do anybody any
10 good just moving him in and out of a bed for a short period
11 of time without something with more stability.

12 I know the -- I know in -- I have every bit of
13 confidence that though they haven't shared, which I also
14 find amusing that we don't share the reports about the same
15 people we serve in the state and federal system, that they
16 are going to, over at the circuit court, they are going to
17 be pretty darn happy that we'll take responsibility, which I
18 have told Ms. Perlow we have more resources. They are not
19 adequate at all, and they are not tempered with enough
20 mental health stuff, but they are better than what the state
21 has at the moment.

22 So I am going to follow the recommendation, but it
23 has everything to do with trying to get him in a place to
24 get stability and get him what he needs to find a long-term
25 plan.

09:35:33 1 But I would appreciate that maybe somebody would
2 in the -- talk about the bigger mental health issue in this
3 district and particularly in this Eugene area where we don't
4 have -- we barely have what's adequate, and Willamette
5 Family has now revamped their entire nonprofit to deal with
6 dual diagnosis clients down here, which they are being
7 overrun with.

8 And then, of course, we don't have anything,
9 really, down in Southern Oregon.

10 So this is a systems issue.

11 And Mr. Crawford, you are going to be in a
12 different spot up in Portland and a different situation.
13 And it's going to matter to you that you find one or more
14 resources up there, including Mr. Preuitt, who you can
15 communicate with to move you through your supervision period
16 successfully because you will end up in prison if you don't.

17 I say all this because I -- people come in here
18 and just neglect talking about the mental health side of
19 stuff.

20 And thank you, Mr. Lessley, for those. I have
21 been with this case from the very beginning. And, you know,
22 some cases are not just a quick fix. So he's not a quick
23 fix.

24 MR. LESSLEY: And, Your Honor, neither Mr. Morales
25 nor Mr. Bruce was with the case at the time, so I want to --

09:36:49

1 THE COURT: That's right.

2 MR. LESSLEY: I know Your Honor knows what I am
3 about to say, but I would like to provide this context too,
4 and it echoes what Your Honor read.

5 The original disposition of this case involved
6 a -- he had already been committed to the jurisdiction of
7 Oregon Health Authority through a Yamhill County case. He
8 had about four years left -- it was a five-year commitment.
9 He had about four years -- Polk County. I am sorry. He had
10 about four years left of that commitment at the time Your
11 Honor sentenced him. And the understanding at the time --
12 he was actually at the Oregon State Hospital at the time.

13 THE COURT: Right.

14 MR. LESSLEY: The understanding at the time was
15 that OHA, Oregon Health Authority jurisdiction, would, if it
16 were determined that he had -- was ready to leave the Oregon
17 State Hospital, that they would maintain jurisdiction,
18 provide housing, provide mental health treatment, and if it
19 was sensed that he was going manic again, they would have
20 the authority to adjust his placement.

21 Instead of that, seven months later, in October of
22 2014, they kicked him out of the Oregon Health Authority
23 entirely, and now he ended up on our lap without the
24 services that it was originally intended that they would
25 provide.

09:38:04 1 And that plan that we presented to Your Honor and
2 that Your Honor adopted was actually approved not just by
3 Your Honor, but there was an assistant attorney general
4 helping to prosecute the case, and that plan was approved at
5 some high level of the attorney general's office in
6 Washington.

7 And so we did really get kind of, and I use the --
8 THE COURT: Drop-kicked.

9 MR. LESSLEY: Drop-kicked by the Oregon Health
10 Authority that dropped what it said it would do, and now
11 this is landing in our lap because he should actually still
12 be under Oregon Health Authority jurisdiction through at
13 least some part of 2020, and he's not.

14 So that's just background for people who weren't
15 around at the time.

16 THE COURT: And this is a complicated case. But
17 there are no quick fixes on cases like this.

18 And, you know, until I leave the bench,
19 Mr. Crawford, and until you are off supervision, you are
20 stuck with me.

21 Not so stuck with Mr. Lessley.

22 THE DEFENDANT: I know. He's retiring.

23 THE COURT: Yeah, I know. There's a very strong
24 grapevine, even on walking paths.

25 So I will tell you that you are stuck with me,

09:39:12 1 and, as you can see, your historical resource is going to be
2 gone.

3 And I will -- you know, but you have to go more
4 than halfway with meeting the expectations of what this says
5 because, frankly, when you go off your medication, you get
6 cocky and do these crazy things that obviously have the U.S.
7 Attorney's Office up in arms because they should be, but at
8 the same time it doesn't do any good to just keep bringing
9 you in and out of prison when they are not giving you
10 adequate medication or they are not giving you any
11 medication or they take you off medication. We have to keep
12 you in a consistent process of being seen and being on the
13 right medications or it's just not productive.

14 MR. LESSLEY: Your Honor, and this is going to
15 happen: So he's going to presumably remain at Sheridan
16 until the bed becomes available. Sheridan will let him
17 leave with a very small, few-day supply of whatever
18 medications they have him on. He's not going to be able to
19 get on the Oregon Health Plan until he's out of custody.

20 So he's going to end up getting to the Northwest
21 Regional Reentry Center with a very small amount of
22 medication and no further care and no further prescription
23 provided for because he won't have a primary care physician
24 or prescribing physician until after he gets on Oregon
25 Health Plan and until after he can get an appointment, until

09:40:32 1 after he can get -- so there's going to be this delay.

2 So, once again, we are going to be in this
3 situation where his medications are going to be an issue at
4 the time he gets out.

5 And so -- and so, you know, one of the things that
6 we sometimes are able to do here is have someone kind of
7 anticipate and work with the Oregon Health Plan so that it
8 kicks in the day he's released rather than have him start
9 the application process then.

10 THE COURT: Two things come to mind.

11 Number one, I'd ask you, Mr. Lessley, to have a
12 debriefing session with Matt Preuitt, and I will work my end
13 to see that this case gets assigned to him. That's number
14 one.

15 And number two, there's rumors that your office,
16 short-timer that you are, has a social worker now hired. I
17 have not met the social worker that's hired. And other U.S.
18 Attorney's office have social workers on staff to make sure
19 that this happens from both ends.

20 But you at least have one up there, and I would
21 ask you to brief the social worker and have her stay in
22 contact with me so that we can make sure that he has the
23 medications he needs because, again, I am not sure how long
24 he will get to stay at the Northwest Regional Reentry Center
25 if he starts acting up. They don't -- they are not -- their

09:41:50 1 tolerance level is such and their waiting list is such that
2 I am not sure if Mr. Cody starts to act up, he wouldn't be
3 just kicked out.

4 So that's a concern of mine and to get everything
5 set up in Portland. I understand and you should be up there
6 if your mother's in the last stages of her illness. You
7 need to be there, and I am going to make those
8 accommodations because, frankly, the best situation we have
9 for you right now is the Northwest Regional Reentry Center
10 because down here you have kind of burned some bridges and I
11 don't have anything in Southern Oregon.

12 And so I would like to hope that we can make this
13 work for you.

14 THE DEFENDANT: I wouldn't want to start out in
15 Eugene again.

16 THE COURT: Pardon?

17 THE DEFENDANT: Eugene is overburdened. That's
18 what I saw when I went to Willamette Family.

19 THE COURT: Yes, Eugene is overburdened because we
20 are having to pick up the slack for Southern Oregon. Yeah,
21 we are overburdened, and we are overburdened just with our
22 own demand here. And we have no jail space. We have no --
23 our resources are dwindling, and we are accepting, I guess,
24 the new normal, and I am not willing to accept the new
25 normal.

09:42:55 1 THE DEFENDANT: My evaluator was falling asleep
2 during the evaluation with me at Willamette Family. That's
3 why I thought they were overburdened.

4 THE COURT: I don't really need to know the name
5 of the person, but maybe you could share that with
6 Mr. Lessley if you know the name of the person because I
7 will talk to Willamette Family. That's unacceptable. I
8 don't care to know who it is, but I think they need to know
9 that they have further staff for evaluations. That's not
10 acceptable.

11 But that's -- and, again, when you talk about
12 Oregon being the worst when at least you have people who
13 care about that work, they are so strung out trying to do
14 this work. We are asking too much of people making a modest
15 amount of money to hold a health care -- mental health care
16 system together with nothing.

17 So what -- you understand how significant this
18 period in your life has to be?

19 THE DEFENDANT: I do. I do understand. And I
20 have also had a very difficult time finding a medication, a
21 medication that works for me that doesn't have such severe
22 side effects that it causes more issues for me than what
23 it's supposed to help. It's a very fine line trying to find
24 stuff that's therapeutic versus detrimental.

25 For instance, when I was at the State Hospital,

09:44:17 1 for the vast majority of the time I was there for three
2 years, I was not on classic antipsychotics. I was not on
3 any medication for behavior. I was on medication for a
4 chronic pain condition that I have in my heel from when I
5 shattered my heel when I was 18.

6 And when I got out I couldn't find a doctor. I
7 didn't have OHP right away when I got out of the Oregon
8 State Hospital, or maybe I did, but I just -- I had to jump
9 into work all the time. You know, I have had that job with
10 doing the Comcast contracting stuff, hard physical labor,
11 and I couldn't find a doctor that would refill the
12 prescription for the pain medicine I was on because of the
13 opioid epidemic because what I took was Tramadol and
14 Neurontin.

15 And the doctors, I figured they would just look at
16 me and say, oh, white male, opioid epidemic, he's burnt.
17 So --

18 THE COURT: Well, what I hope is --

19 THE DEFENDANT: Just didn't have the time to try
20 and find a doctor.

21 THE COURT: -- when Mr. Lessley sits down and
22 talks to the probation officer and the social worker and the
23 social worker gets a chance to talk to you, I would strongly
24 suggest they go back and look at your files and the
25 recommendations and the medications you were on at the State

09:45:44 1 Hospital because that's three years the State of Oregon
2 invested in getting you stable --

3 THE DEFENDANT: Yeah, I was stable.

4 THE COURT: -- and back ready to proceed in this
5 litigation. So somebody should take a look at what worked.

6 THE DEFENDANT: Thank you. And in the meantime, I
7 got myself put onto -- what is it called? Tricyclic
8 antidepressant. It's an older one called Doxepin. That's
9 like two birds with one stone because it treats chronic
10 pain, which ends up causing you depression when you have
11 pain all the time, and it also treats panic disorders. And
12 I was treated fairly successfully with it. I have been on
13 it for three months at Sheridan under Dr. Cantu.

14 But anticipating the problems with maintaining
15 that medicine, transitioning into a group home environment,
16 I started titrating off of that medicine because I figured
17 it would be hard to get it, and I didn't want to just
18 abruptly stop it like when I got to RCC in September,
19 September 14th, I was taking trazodone nightly, like
20 50 milligrams to help me sleep from Washington County Jail.
21 And they didn't have any medicine for me the very day I got
22 to the halfway house. No trazodone.

23 And I went in a complete manic phase. And I tried
24 really hard. I tried. I had no resources, no money, no
25 nothing to be able -- they said, well, you can go buy

09:47:17 1 over-the-counter Benadryl. I was like, well, I don't have
2 any money, but I did manage to get my flu vaccine, and I did
3 manage to get on nicotine lozenges because OHP covered that.

4 But I did the best I could. I really did. And I
5 know me being punished for mental health episodes by putting
6 me in jail where I catch new charges, that's terrible. But
7 that's what we do in Oregon.

8 The cell block I am on in Springfield jail all
9 night long you had people banging on the walls and screaming
10 out because they were having hallucinations and stuff.

11 And this is -- I have seen this in every jail I
12 have been in in this country, and it's sad. And I hope some
13 day maybe it can be a little bit different, but I know it
14 costs a lot of money, and I am going to do my part and I am
15 going to do the best that I can.

16 And thank you for the more than second chance
17 everybody.

18 THE COURT: Well, you are getting sanctioned for
19 your behaviors, and we are trying to find the right
20 constellation of services that will sustain. But --

21 THE DEFENDANT: I did break the law, and I
22 understand that.

23 THE COURT: People shouldn't have to break the law
24 to get services, purposefully or accidentally.

25 So I am going to follow the recommendation because

09:48:43 1 I want this case resolved by the state. And I know
2 Ms. Perlow has a commitment to try to do better work with
3 mental health. They have a mental health court, and she
4 will tell you that it's a great concept, but they can't get
5 people to come because they don't have housing. They don't
6 have enough stability to be able to come to a court
7 appearance for a mental health court. It's chaos. So that
8 court, their best efforts right now are struggling.

9 I really believe a mental health reentry court, a
10 dual diagnosis reentry court -- I do it one at a time. So I
11 will set up a status conference with you within two weeks of
12 your placement at the RRC to make sure everything is stable.

13 So I can't predict when that will be unless
14 Mr. Lessley knows what has been --

15 MR. LESSLEY: We don't know a date yet.

16 PROBATION OFFICER MORALES: Your Honor, I just
17 talked to my supervisor up in Portland, and he's saying it's
18 about seven to ten days is what they are looking at right
19 now as soon as the order is signed and we send the request
20 up to Seattle.

21 THE COURT: So let's put -- why don't we put him
22 on my May -- when I am up in Portland in May.

23 THE CLERK: Status conference is set for May 14th,
24 2018, at 2:30 p.m., in Portland.

25 THE DEFENDANT: Oh, in Portland?

09:50:13

1 THE COURT: I have -- I work out of Portland.

2 THE DEFENDANT: Oh, okay. Thank you. I was
3 fearing the bus ride.

4 THE COURT: No, no, no. I will work -- I have a
5 Portland calendar. That day -- I know that's a day I am up
6 there, but if I need to do something else.

7 So I am going to follow -- find that -- do the
8 formalities. Based on the two violations, your term of
9 supervised released is revoked.

10 You are committed to the custody of the Bureau of
11 Prisons for time served considered served.

12 I believe that you are appropriate for continued
13 community supervision, but you need assistance with your
14 medication and mental health requirements.

15 So I am going to order that you reengage in all
16 the services that have been previously announced and then
17 the following additional conditions:

18 That you shall reside in a residential reentry
19 center for up to 180 days.

20 MR. LESSLEY: Your Honor, the recommendation was
21 120. I am not quibbling. I am just saying --

22 THE COURT: On mine it says 180.

23 Well, no. I see what that -- it's a weird format.

24 So up to 120 days. You were to be 180 days in the
25 previous order.

09:51:34

1 120 days.

2 You are to follow the regulations and the
3 obligations of the center.

4 You are remanded to the custody of the marshals
5 and will remain in custody until your bed becomes available,
6 which I am grateful is seven to ten days.

7 There are other conditions listed. There are 12
8 conditions, Mr. Lessley. Have you reviewed --

9 MR. LESSLEY: Yes, we were reading them downstairs
10 before court.

11 THE COURT: And those are all the previous
12 conditions. So there's nothing particularly new.

13 I will see you on the 14th of May.

14 Do you have any questions? You know what the
15 expectations are?

16 THE DEFENDANT: Yes, I do, Your Honor. Thank you.

17 THE COURT: Anything?

18 PROBATION OFFICE MORALES: Your Honor, just to be
19 clear, he's currently on probation. He's not on supervised
20 release, so revoking his probation --

21 THE COURT: Oh, that's right. I was sitting here
22 thinking that I -- thank you. So -- thank you. I will
23 clarify that.

24 Your term of probation is revoked. You are
25 committed to the custody of the Bureau of Prisons for the

09:52:26 1 time served considered served.

2 You showed that you are not capable of residing in
3 the community without proper assistance with your medication
4 and mental health requirements.

5 Therefore, the court finds that you violated your
6 terms of probation by failing to reside in a residential
7 reentry center for not more than 180 days and committing the
8 new law violations.

9 The court finds you are no longer suitable for
10 community supervision.

11 It's ordered, therefore, that your term of
12 probation is revoked, and you are committed to the Bureau of
13 Prisons for a period of time served considered served.

14 Upon release from your imprisonment, you are
15 subject to the terms of supervised release under 18 U.S.C.
16 § 3583, and that then sets out your period of supervision
17 for the next 36 months with the conditions that I have just
18 reviewed.

19 Okay? Is that clear? So your probation is
20 revoked --

21 THE DEFENDANT: As clear as it could be.

22 THE COURT: -- and now you are on supervised
23 release because you have been in custody a substantial
24 period of time.

25 Any questions that you have?

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THE DEFENDANT: No, Your Honor.

THE COURT: And Mr. Lessley, you might make a recommendation to your office about who should take this case. I hope you will do that.

MR. LESSLEY: I will come up with one. If I can do it, that would be my plan.

THE COURT: Okay.

MR. LESSLEY: Well, I mean, in terms of after I am?

THE COURT: Pardon?

MR. LESSLEY: I am not sure what Your Honor is asking about.

THE COURT: Just after -- whenever -- when you have moved on, I just want to make sure he's reassigned to someone who --

MR. LESSLEY: I am -- I have not had a chance to come and talk to Your Honor about my plans and had fully intended to do that, but I am still going to be around. I am still going to be practicing, so my --

THE COURT: Oh, excellent.

MR. LESSLEY: Yeah, I am going to be practicing with Tina.

THE COURT: I thought you might be just doing civil work, so.

MR. LESSLEY: No.

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THE COURT: Oh, excellent.

MR. LESSLEY: I am going to be on the panel.

THE COURT: Excellent.

MR. LESSLEY: I will ask them to keep me on this.

THE COURT: That's good news.

All right. You have 14 days in which to appeal the sentence in this case. If you can't afford to do so, contact the clerk's office. It will be done for you and done for free.

I hope at some point you start to anticipate -- I don't know how to say this otherwise. One of the things --

THE DEFENDANT: I do. I keep a journal.

THE COURT: One of the things I have been incredibly working on for weeks is to have the ability to put a wristband that identifies -- it's all research done by Tel Aviv University that identifies in your phone and by the information it picks up when people start to go into episodic mental health issues. Nobody seems to be --

THE DEFENDANT: Increase of activity, more like double the paces today. Warning.

THE COURT: There is incredible research that lets people know there's something going on and we should intervene before something else happens. It would be smart because it's inexpensive. It would be smart for people to pick up and use it.

09:55:04 1 But, again, we'd rather lock people up in jail.
2 So you have 14 days, again, to appeal the sentence
3 in this case. If you wish to do so, contact the clerk's
4 office. It will be done for you and done for free.
5 THE DEFENDANT: Thank you, Your Honor, and I will
6 find a Fitbit.
7 THE COURT: Well, get something on and we'll talk
8 about it. All right? I just want you to be able to
9 anticipate and get ahead of some of your issues.
10 MR. BRUCE: Thank you, Your Honor.
11 *(The proceedings were concluded this*
12 *11th day of April, 2018.)*
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09:55:36 1 I hereby certify that the foregoing is a true and
2 correct transcript of the oral proceedings had in the
3 above-entitled matter, to the best of my skill and ability,
4 dated this 25th day of May, 2018.

5
6 /s/Kristi L. Anderson

7 Kristi L. Anderson, Certified Realtime Reporter
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